REMARKS

Applicants hereby reply to the Office Action mailed on February 8, 2006 within the shortened statutory three month period for reply. Claims 1-21 were pending in the application and the Examiner rejects claims 1-21. Applicants add claim 22. Support for the amendments may be found in the originally-filed specification, claims, and figures. No new matter has been introduced by these amendments. Applicants assert that the application is in condition for allowance and reconsideration of the pending claims is requested.

Rejections Under 35 U.S.C. § 112, ¶ 2

Claims 14-17 stand rejected under 35 U.S.C. § 112, second paragraph, as being indefinite for failing to particularly point out and distinctly claim the subject matter which the Applicants regard as the invention. Specifically, the Examiner has noted that claims 14 and 17, "recite the limitation 'said template' on line 15 of each claim. There is no antecedent basis for this limitation in the claims" (page 2, item 3). Applicants have amended claims 14 and 17 accordingly.

Rejection under 35 U.S.C. § 103(a)

The Examiner rejects claims 1-17 under 35 U.S.C. § 103(a) as being unpatentable over Killcommons et al., U.S. Patent No. 6,424,996 ("Killcommons") in view of Moshfeghi et al., U.S. Patent No. 6,076,166 ("Moshfeghi") in further view of Kennedy, U.S. Patent No. 5,360,446 ("Kennedy") and in further view of Knight, U.S. Patent No. 6,344,853 ("Knight"). Applicants respectfully traverse these rejections.

Killcommons generally discloses a system for storing medical multimedia files, wherein the files can be assembled into an email package and/or viewed within a browser application. Specifically, Killcommons discloses a tool to facilitate management of medical images and information which can be disseminated to users through either email communications or the Web. Medical images may include digital scans, photographs, video and sound. The Killcommons system collects files from various locations, assembles the file elements and delivers them to a user within an email message or web page. A user viewing a patient's electronic file may view various images and/or multimedia clips through an interface. The interface provides a number of tools to enable the user to select and manipulate images, create text and voice annotations, and perform measurements and angle calculations.

The Examiner correctly notes that Killcommons does not "disclose that the user is authorized, or that the user inputs a unique identifier" (page 3, paragraph 3). However, the Examiner asserts that Moshfeghi discloses this limitation.

Moshfeghi generally discloses a system for managing patient medical information via a secured hospital intranet. Specifically, Moshfeghi discloses a web server facilitating dynamic assembly of web pages based on user information such as the user's relationship with the hospital, presumed needs and access rights. The Moshfeghi system stores preferences for each user and uses preferences information to dynamically create web pages to best suit the user's screen resolution, network connection, browser capabilities, environmental lighting and the like. When a user accesses the Moshfeghi system, the user is identified by IP address, smart card, active badge, etc. in order to retrieve the appropriate preferences information.

The Examiner correctly notes that, "Killcommons et al., either alone or in combination with Moshfeghi et al., do not disclose facilitating real time interaction by said first and second authorized users to place and manipulate a template" (page 4, paragraph 2). However, the Examiner asserts that Kennedy discloses this limitation.

Kennedy discloses a system for interactively designing prosthetic implants using two x-ray images to create an implant topology which is later used to manufacture an implant. Specifically, the Kennedy system stores x-ray radiograph images within a database where the images can be subsequently retrieved for display on a computer display device. The user may then interact with the image to more clearly define the topology of a joint implant area. When the topology is defined and calculated, a proper fitting of a prosthesis device can be determined and the system may then interface various shaping tools to properly dimension the prosthesis.

Killcommons, Moshfeghi, and Kennedy each lack the disclosure to enable multi-party collaboration in a manner consistent with real-world practice in the medical community. In cases where a patient's life or quality of life is in question, physicians and surgeons rely on the diverse expertise and experience of a team. Modern tools, such as those referenced by the Examiner, have been designed to enhance the medical professional's ability to diagnose and treat patients.

Killcommons and Moshfeghi generally disclose systems for compiling medical information including text and multimedia for presentation to remote users. For example, Killcommons discloses enabling two or more users to view information regarding a patient and to communicate in a "chat like" environment. However, neither of the references discloses tools for facilitating medical image manipulation collaboration without regard to geography. For example, it would be beneficial for the prosthesis design system of Kennedy to enable a surgeon in Los Angeles to work with a prosthesis designer in Boston through real-time interaction via the Internet. Each would be able to manipulate the medical image and share comments, while each having visibility into what the other is doing. As such, neither Killcommons, Moshfeghi, Kennedy, nor any combination thereof, disclose or suggest at least, "facilitating interaction by at least one of said first authorized user and said second authorized user to place and manipulate at least one of said template and said medical image, wherein said interaction of at least one of said template and said medical image by said first authorized user is viewable by said second authorized user in real time," as similarly recited by independent claims 14 and 17.

Claims 15 and 16 depend from independent claim 14, therefore 15 and 16 are differentiated from the cited reference for at least the same reasons as set forth above, as well as in view of their own respective features

In rejecting claim 1, the Examiner has cited Knight in support of his assertion that, "by applying the teachings of Knight, a physician would be able to overlaying [sic] a template on a medical image obtained from a web page, so that the physician may be able to determine a proper design of a medical device to be implanted" (page 7, paragraph 1).

Knight is limited to a method for enabling remote users to superimpose product logos and other designs onto digitized images of a variety of products (e.g., coffee mugs, watches, baseball caps, tee shirts, etc.). According to Knight, a user superimposes graphics onto a digital image only to determine a design and design placement that best suits their needs and preferences. However, the Knight system is limited to facilitating the viewing of prospective designs in order to enhance the design selection process. Knight does not provide an adequate disclosure to enable multi-user interaction in the manipulation of a design. As such, Knight does not disclose or suggest at least, "facilitating real time interaction by a plurality of

authorized users to place and manipulate at least one of said template and said medical image, wherein interaction by a first authorized user with at least one of said template and said medical image is viewable by said plurality of authorized users in real time" as recited by independent claim 1.

Claims 2-13 variously depend from independent claim 1, therefore 2-13 are differentiated from the cited reference for at least the same reasons as set forth above, as well as in view of their own respective features.

The Examiner rejects claims 18, 19, and 21 under 25 U.S.C. 103(a) as being unpatentable over Killcommons in view of Kennedy and in further view of Knight. Applicants respectfully traverse these rejections.

As argued above in reference to claims 1 and 14, Applicants assert that neither Killcommons, Kennedy, Knight, nor any combination thereof, disclose or suggest at least, "a network for delivering said medical image, said template and said information to said plurality of users and to facilitate interaction by said plurality of users to place and manipulate at least one of said template and said medical image, wherein said interaction by a first authorized user with at least one of said template and said medical image is viewable by said plurality of authorized users in real time," as recited by amended independent claim 18.

Claims 19 and 21 depend from independent claim 18, therefore claims 19 and 21 are differentiated from the cited references for at least the reasons set forth above, as well as their own respective features.

The Examiner rejects claim 20 under 25 U.S.C. § 103(a) as being unpatentable over Killcommons in view of Kennedy and Knight. Applicants respectfully traverse this rejections. Claim 20 depends from independent claim 18 and therefore is differentiated from the cited references for at least the reasons set forth above, as well as its own respective features.

New claim 22 depends from independent claim 1, so claim 22 is differentiated from the cited references for at least the reasons set forth above, as well as its own respective features.

Applicants respectfully submit that the pending claims are in condition for allowance. No new matter is added in this Reply. The Commissioner is hereby authorized to charge any

fees which may be required, or credit any overpayment, to Deposit Account No. **19-2814**. Applicants invite the Examiner to telephone the undersigned, if the Examiner has any questions regarding this Reply or the present application in general.

Respectfully submitted,

Dated: 4/19/06 By: _____
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